### Michigan First Healthcare Plan Update

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- Too many people do not have insurance coverage-
- The uninsured get care in ERs and hospitals once their medical problems have become severe
- We all pay

Employer premium subsidy (\$274/person and \$730/family)

- Grant programs
- Bankruptcies





- Making Health Care affordable and Accessible in Michigan

Step 1...The Michigan First Healthcare Plan

- Step 2...Advancing Health Information Technology
- Step 3...Promoting Healthy Lifestyles



# Michigan First Healthcare Plan

#### Goals:

- Protect and expand health care coverage
- Reduce trend in health care cost growth
- Improve business competitiveness
- Meet goals without increasing state spending



# Michigan First Healthcare Plan

#### Principles:

- No big government program
- Public/Private Partnership
- Market approach
- Promote a culture of health insurance
- Reinforce personal responsibility
- Complement employer-sponsored insurance



### Michigan First Healthcare Plan Targets All Uninsured

- Under 200% FPL 550,000, 50% of Uninsured
- ✓ Uninsured parents and childless adults
- government programs will be excluded Individuals with adequate access to insurance or
- Over 200% FPL 550,000
- ✓ <u>Insurance Pool</u>. Improved access to affordable insurance for small businesses – No subsidy



## Michigan First Health Care Plan Benefits

- Benefit package will include:
- Preventive and primary care
- Hospital care
- Emergency room care
- Mental health services
- Prescription drugs
- Includes annual benefit limits



## Healthy Lifestyle Components

Intend to require health plans to incorporate including financial incentives. education and support for lifestyle change

### This may include:

- Expect to ask enrollees to complete a health risk appraisal within 90 days of enrollment.
- Follow up with primary care physician
- Waive co-pays on important maintenance drugs for chronic diseases.
- Incentives to use behavior change/wellness programs
- Set performance measures for participating health plans



### Cost Sharing

- Anticipate monthly premiums below \$200
- co-pays Enrollees below 100 % of poverty subject to
- Enrollees between 100% and 200% of poverty level will participate through sliding scale not to exceed 5% of income premium payments and co payments on a



### Plan Operation

- Not a Medicaid expansion
- Anticipate creation of an "Exchange" to operate this segment of the market
- Requires state legislation
- DCH and OFIS would be responsible for state health insurance requirements. compliance with waiver requirements and oversight of the Exchange to assure



### Michigan First Healthcare Plan "The Exchange"

- insurance products for individuals and small businesses Select managed care plans to offer new affordable health
- Assure that the plans selected offer products that comply with other value purchasing requirements state set benefit guidelines, healthy lifestyle in values and
- Responsible for enrollment function
- Administer Michigan First Premium subsidies for eligible enrollees
- Collect any voluntary employer contributions
- through the Exchange for their employees Work with small employers to sponsor insurance available



## Cost Effectiveness

- Require managed care plans to be a delivery mechanism
- Plans will compete for enrollees on benefit design, provider network, quality, access and price
- Value based purchasing principles embedded in benefit design and plan requirements
- Healthy lifestyle Initiatives





- Amendment to existing Adult Benefit Waiver – no entitlement
- Financing builds on mechanisms already approved in that waiver
- State match to come from funds already spent by the State of Michigan on health care for the uninsured



#### Financing

- Federal funding would come from:
- government Federal funds Michigan has saved the federal
- Funds the federal government would spend in the absence of this waiver





- Have met with numerous stakeholders to solicit input and help with design
- Ongoing negotiations with the Center for Medicare and Medicaid Services (CMS)
- Developing concrete implementation plans

